

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Every Voice Action</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00566208	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Buying Time</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 18 / 2014	
Mailing Address 650 Massachusetts Ave NW Ste 210		Amount 200131.00	
City Washington	State DC	Zip Code 20001-3728	Transaction ID : VN7BA9VK839
Purpose of Expenditure Advertising	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 16 / 2014	
Name of Federal Candidate Mike Rounds		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: SD	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Every Voice</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 18 / 2014	
Mailing Address 1133 19th St NW FI 9		Amount 1000.00	
City Washington	State DC	Zip Code 20036-3612	Transaction ID : VN7BA9VP3B6
Purpose of Expenditure Social Media Advertisement Costs	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 18 / 2014	
Name of Federal Candidate Mike Rounds		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: SD	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	201131.00
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

David Donnelly

[Electronically Filed]

Date

MM / DD / YYYY  
09 / 19 / 2014

Signature